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U.S. PATENT AND TRADEMARK OFFICE

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MATTINGLY & MALUR, P.C.

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ALEXANDRIA, VIRGINIA 22314

PATENT, TRADEMARK
AND COPYRIGHT LAW

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Date: September 1, 2009

Facsimile Number: 571-273-8300

To: Examiner V. Coolman
Group Art Unit 3618, USPTO

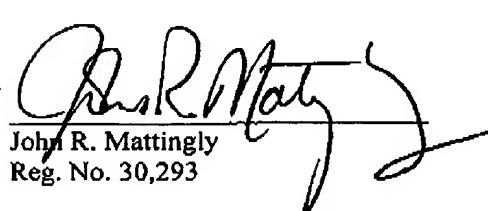
From: Mr. John R. Mattingly
MATTINGLY & MALUR, P.C.

Re: USSN 10/567,908
Attorney Docket No.: KAS-5191

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following listed documents are being facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below:

**Transmittal;
Amendment;
Petition for Extension of Time; and
Credit Card Payment Form in amount of \$490.00
in payment of two month extension of time.**


John R. Mattingly
Reg. No. 30,293

September 1, 2009
Date

Total Number of Pages (including cover sheet): _____

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Form PTO-1083

In RE application of J. KAWAMOTO et al

Serial No.: 10/567,908

For: SWIVEL JOINT FOR CONSTRUCTION MÁCHINE

Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

- Small entity of this application under 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted.
- A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.
- No additional fee is required.

The fee has been calculated as shown below:

(Col. 1)	(Col. 2)	(Col. 3)		SMALL ENTITY	OTHER THAN A SMALL ENTITY
Claims Remaining After Amendment	Minus	Highest No. Previously Paid For	Present Extra	Rate	Rate
Total	Minus	**	=	X 25 \$	X 50 \$
Indep.	Minus	***	=	X 100 \$	X 200 \$
<input type="checkbox"/> First presentation of Multiple Dependent Claims				X 180 \$	X 360 \$
				Total \$	Total \$

- * If the entry in Col 1 is less than the entry in Col. 2, write "0" in col. 3.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write '20' in this space.
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write '3' in this space.
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior Amendment or the number of claims originally filed.

- Please charge my Deposit Account No. 50-1417 in the amount of \$_____.
- A Credit Card Payment Form in the amount of \$ 490.00 is attached for 2 month EOT.
- The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayments to Deposit Account No. 50-1417.
 - Any filing fees under 37 CFR 1.16 for the presentation of extra claims.
 - Any patent application processing fees under 37 CFR 1.17.
 - Any Extension of Time fees that are necessary, which are hereby requested if necessary.

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Date: September 1, 2009

By: 
 John R. Mattingly Reg. No. 30,293
 Attorney for Applicant(s)